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<p>(21) International Application Number: PCT/US97/10906 (22) International Filing Date: 24 June 1997 (24.06.97) (30) Priority Data: 60/020,656 27 June 1996 (27.06.96) US (71) Applicant (for all designated States except US): SMITHKLINE BEECHAM CORPORATION (US/US); One Franklin Plaza, Philadelphia, PA 19103 (US). (72) Inventor; and (75) Inventor/Applicant (for US only): WIDDOWSON, Katherine, L. [CA/US]; 1047 Old Valley Forge Road, King of Prussia, PA 19406 (US). (74) Agents: DINNER, Dara, L. et al.; SmithKline Beecham Corporation, Corporate Intellectual Property, UW2220, 709 Swedeland Road, P.O. Box 1539, King of Prussia, PA 19406-0939 (US).</p>		<p>(81) Designated States: JP, US, European patent (AT, BE, CH, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE). Published With international search report.</p>
<p>(54) Title: IL-8 RECEPTOR ANTAGONISTS</p> <p>(57) Abstract</p> <p>This invention relates to the use of phenyl ureas of formula (I) in the treatment of disease states mediated by the chemokine, Interleukin-8 (IL-8). The variables of (I) are defined herein.</p> <div style="text-align: center;"> <p style="text-align: right;">(I)</p> </div>		

IL-8 RECEPTOR ANTAGONISTS

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FIELD OF THE INVENTION

This invention relates to a novel group of phenyl urea compounds, processes for the preparation thereof, the use thereof in treating IL-8, GRO α , GRO β , GRO γ , NAP-2 and ENA-78 mediated diseases and pharmaceutical compositions for use in such therapy.

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BACKGROUND OF THE INVENTION

Many different names have been applied to Interleukin-8 (IL-8), such as neutrophil attractant/activation protein-1 (NAP-1), monocyte derived neutrophil chemotactic factor (MDNCF), neutrophil activating factor (NAF), and T-cell lymphocyte chemotactic factor. Interleukin-8 is a chemoattractant for neutrophils, basophils, and a subset of T-cells. It is produced by a majority of nucleated cells including macrophages, fibroblasts, endothelial and epithelial cells exposed to TNF, IL-1 α , IL-1 β or LPS, and by neutrophils themselves when exposed to LPS or chemotactic factors such as FMLP. M. Baggiolini et al, J. Clin. Invest. 84, 1045 (1989); J. Schroder et al, J. Immunol. 139, 3474 (1987) and J. Immunol. 144, 2223 (1990); Strieter, et al, Science 243, 1467 (1989) and J. Biol. Chem. 264, 10621 (1989); Cassatella et al, J. Immunol. 148, 3216 (1992).

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GRO α , GRO β , GRO γ and NAP-2 also belong to the chemokine α family. Like IL-8 these chemokines have also been referred to by different names. For instance GRO α , β , γ have been referred to as MGS α , β and γ respectively (Melanoma Growth Stimulating Activity), see Richmond et al, J. Cell Physiology 129, 375 (1986) and Chang et al, J. Immunol. 148, 451 (1992). All of the chemokines of the α -family which possess the ELR motif directly preceding the CXC motif bind to the IL-8 B receptor.

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IL-8, GRO α , GRO β , GRO γ , NAP-2 and ENA-78 stimulate a number of functions in vitro. They have all been shown to have chemoattractant properties for neutrophils, while IL-8 and GRO α have demonstrated T-lymphocytes, and basophiles chemotactic activity. In addition IL-8 can induce histamine release from basophils from both normal and atopic individuals GRO- α and IL-8 can in addition, induce lysozomal enzyme release and respiratory burst from neutrophils. IL-8 has

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also been shown to increase the surface expression of Mac-1 (CD11b/CD18) on neutrophils without de novo protein synthesis. This may contribute to increased adhesion of the neutrophils to vascular endothelial cells. Many known diseases are characterized by massive neutrophil infiltration. As IL-8, Gro α , GRO β , GRO γ and NAP-2 promote the accumulation and activation of neutrophils, these chemokines have been implicated in a wide range of acute and chronic inflammatory disorders including psoriasis and rheumatoid arthritis, Baggiolini et al, FEBS Lett. 307, 97 (1992); Miller et al, Crit. Rev. Immunol. 12, 17 (1992); Oppenheim et al, Annu. Rev. Immunol. 9, 617 (1991); Seitz et al., J. Clin. Invest. 87, 463 (1991); Miller et al., Am. Rev. Respir. Dis. 146, 427 (1992); Donnelly et al., Lancet 341, 643 (1993). In addition the ELR chemokines (those containing the amino acids ELR motif just prior to the CXC motif) have also been implicated in angiostasis. Strieter et al, Science 258, 1798 (1992).

In vitro, IL-8, Gro α , GRO β , GRO γ and NAP-2 induce neutrophil shape change, chemotaxis, granule release, and respiratory burst, by binding to and activating receptors of the seven-transmembrane, G-protein-linked family, in particular by binding to IL-8 receptors, most notably the B-receptor. Thomas et al., J. Biol. Chem. 266, 14839 (1991); and Holmes et al., Science 253, 1278 (1991). The development of non-peptide small molecule antagonists for members of this receptor family has precedent. For a review see R. Freidinger in: Progress in Drug Research, Vol. 40, pp. 33-98, Birkhauser Verlag, Basel 1993. Hence, the IL-8 receptor represents a promising target for the development of novel anti-inflammatory agents.

Two high affinity human IL-8 receptors (77% homology) have been characterized: IL-8R α , which binds only IL-8 with high affinity, and IL-8R β , which has high affinity for IL-8 as well as for GRO- α , GRO β , GRO γ and NAP-2. See Holmes et al., supra; Murphy et al., Science 253, 1280 (1991); Lee et al., J. Biol. Chem. 267, 16283 (1992); LaRosa et al., J. Biol. Chem. 267, 25402 (1992); and Gayle et al., J. Biol. Chem. 268, 7283 (1993).

There remains a need for treatment, in this field, for compounds which are capable of binding to the IL-8 α or β receptor. Therefore, conditions associated with an increase in IL-8 production (which is responsible for chemotaxis of neutrophil and T-cells subsets into the inflammatory site) would benefit by compounds which are inhibitors of IL-8 receptor binding.

METHOD OF TREATMENT

The compounds of Formula (I), or a pharmaceutically acceptable salt thereof can be used in the manufacture of a medicament for the prophylactic or therapeutic treatment of any disease state in a human, or other mammal, which is exacerbated or caused by excessive or unregulated IL-8 cytokine production by such mammal's cell, such as but not limited to monocytes and/or macrophages, or other chemokines which bind to the IL-8 α or β receptor, also referred to as the type I or type II receptor.

Accordingly, the present invention provides a method of treating a chemokine mediated disease, wherein the chemokine is one which binds to an IL-8 α or β receptor and which method comprises administering an effective amount of a compound of Formula (I) or a pharmaceutically acceptable salt thereof. In particular, the chemokines are IL-8, GRO α , GRO β , GRO γ , NAP-2 or ENA-78.

The compounds of Formula (I) are administered in an amount sufficient to inhibit cytokine function, in particular IL-8, GRO α , GRO β , GRO γ , NAP-2 or ENA-78, such that they are biologically regulated down to normal levels of physiological function, or in some case to subnormal levels, so as to ameliorate the disease state. Abnormal levels of IL-8, GRO α , GRO β , GRO γ , NAP-2 or ENA-78 for instance in the context of the present invention, constitute: (i) levels of free IL-8 greater than or equal to 1 picogram per mL; (ii) any cell associated IL-8, GRO α , GRO β , GRO γ , NAP-2 or ENA-78 above normal physiological levels; or (iii) the presence of IL-8, GRO α , GRO β , GRO γ , NAP-2 or ENA-78 above basal levels in cells or tissues in which IL-8, GRO α , GRO β , GRO γ , NAP-2 or ENA-78 respectively, is produced.

There are many disease states in which excessive or unregulated IL-8 production is implicated in exacerbating and/or causing the disease. Chemokine mediated diseases include psoriasis, atopic dermatitis, arthritis, asthma, chronic obstructive pulmonary disease, adult respiratory distress syndrome, inflammatory bowel disease, Crohn's disease, ulcerative colitis, stroke, septic shock, endotoxic shock, gram negative sepsis, toxic shock syndrome, cardiac and renal reperfusion injury, glomerulonephritis, thrombosis, graft vs. host reaction, alzheimers disease, allograft rejections, malaria, restinosis, angiogenesis or undesired hematopoietic stem cells release.

These diseases are primarily characterized by massive neutrophil infiltration, T-cell infiltration, or neovascular growth, and are associated with increased IL-8,

GRO α , GRO β , GRO γ or NAP-2 production which is responsible for the chemotaxis of neutrophils into the inflammatory site or the directional growth of endothelial cells. In contrast to other inflammatory cytokines (IL-1, TNF, and IL-6), IL-8, GRO α , GRO β , GRO γ or NAP-2 has the unique property of promoting neutrophil chemotaxis, enzyme release including but not limited to elastase release as well as superoxide production and activation. The α -chemokines but particularly, GRO α , GRO β , GRO γ or NAP-2, working through the IL-8 type I or II receptor can promote the neovascularization of tumors by promoting the directional growth of endothelial cells. Therefore, the inhibition of IL-8 induced chemotaxis or activation would lead to a direct reduction in the neutrophil infiltration.

Recent evidence also implicates the role of chemokines in the treatment of HIV infections, Littleman et al., Nature 381, pp661 (1996) and Koup et al., Nature 381, pp 667 (1996).

The present invention also provides for a means of treating, in an acute setting, as well as preventing, in those individuals deemed susceptible to, CNS injuries by the chemokine receptor antagonist compounds of Formula (I).

CNS injuries as defined herein include both open or penetrating head trauma, such as by surgery, or a closed head trauma injury, such as by an injury to the head region. Also included within this definition is ischemic stroke, particularly to the brain area.

Ischemic stroke may be defined as a focal neurologic disorder that results from insufficient blood supply to a particular brain area, usually as a consequence of an embolus, thrombi, or local atheromatous closure of the blood vessel. The role of inflammatory cytokines in this area has been emerging and the present invention provides a mean for the potential treatment of these injuries. Relatively little treatment, for an acute injury such as these has been available.

TNF- α is a cytokine with proinflammatory actions, including endothelial leukocyte adhesion molecule expression. Leukocytes infiltrate into ischemic brain lesions and hence compounds which inhibit or decrease levels of TNF would be useful for treatment of ischemic brain injury. See Liu et al., Stroke, Vol. 25, No. 7, pp 1481-88 (1994) whose disclosure is incorporated herein by reference.

Models of closed head injuries and treatment with mixed 5-LO/CO agents is discussed in Shohami et al., J. of Vasc & Clinical Physiology and Pharmacology, Vol. 3, No. 2, pp. 99-107 (1992) whose disclosure is incorporated herein by reference. Treatment which reduced edema formation was found to improve functional outcome in those animals treated.

The compounds of Formula (I) are administered in an amount sufficient to inhibit IL-8, binding to the IL-8 alpha or beta receptors, from binding to these receptors, such as evidenced by a reduction in neutrophil chemotaxis and activation. The discovery that the compounds of Formula (I) are inhibitors of IL-8 binding is based upon the effects of the compounds of Formulas (I) in the *in vitro* receptor binding assays which are described herein. The compounds of Formula (I) have been shown to be inhibitors of type II IL-8 receptors.

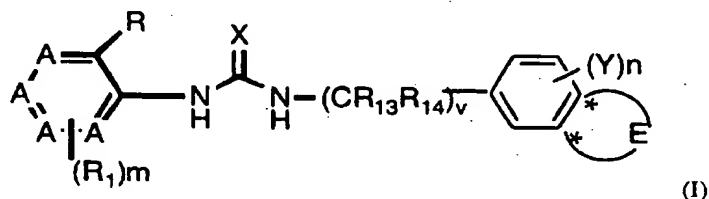
As used herein, the term "IL-8 mediated disease or disease state" refers to any and all disease states in which IL-8, GRO α , GRO β , GRO γ , NAP-2 or ENA-78 plays a role, either by production of IL-8, GRO α , GRO β , GRO γ , NAP-2 or ENA-78 themselves, or by IL-8, GRO α , GRO β , GRO γ , NAP-2 or ENA-78 causing another monokine to be released, such as but not limited to IL-1, IL-6 or TNF. A disease state in which, for instance, IL-1 is a major component, and whose production or action, is exacerbated or secreted in response to IL-8, would therefore be considered a disease stated mediated by IL-8.

As used herein, the term "chemokine mediated disease or disease state" refers to any and all disease states in which a chemokine which binds to an IL-8 α or β receptor plays a role, such as but not limited to IL-8, GRO α , GRO β , GRO γ , NAP-2 or ENA-78. This would include a disease state in which, IL-8 plays a role, either by production of IL-8 itself, or by IL-8 causing another monokine to be released, such as but not limited to IL-1, IL-6 or TNF. A disease state in which, for instance, IL-1 is a major component, and whose production or action, is exacerbated or secreted in response to IL-8, would therefore be considered a disease stated mediated by IL-8.

As used herein, the term "cytokine" refers to any secreted polypeptide that affects the functions of cells and is a molecule which modulates interactions between cells in the immune, inflammatory or hematopoietic response. A cytokine includes, but is not limited to, monokines and lymphokines, regardless of which cells produce them. For instance, a monokine is generally referred to as being produced and secreted by a mononuclear cell, such as a macrophage and/or monocyte. Many other cells however also produce monokines, such as natural killer cells, fibroblasts, basophils, neutrophils, endothelial cells, brain astrocytes, bone marrow stromal cells, epidermal keratinocytes and B-lymphocytes. Lymphokines are generally referred to as being produced by lymphocyte cells. Examples of cytokines include, but are not

What is Claimed Is:

1. A method of treating a chemokine mediated disease state, wherein the chemokine binds to an IL-8 α or β receptor in a mammal, which comprises administering to said mammal an effective amount of a compound of the formula:



wherein

- 10 X is oxygen or sulfur;
 A is nitrogen, provided that only one or two of the A moieties are nitrogen and the remainder are carbon substituted by hydrogen or R₁;
 R is any functional moiety having an ionizable hydrogen and a pKa of 10 or less;
 15 R₁ is independently selected from hydrogen; halogen; nitro; cyano; halosubstituted C₁-10 alkyl; C₁-10 alkyl; C₂-10 alkenyl; C₁-10 alkoxy; halosubstituted C₁-10 alkoxy; azide; (CR₈R₈)_q S(O)_tR₄; hydroxy; hydroxy C₁-4alkyl; aryl; aryl C₁-4 alkyl; aryloxy; aryl C₁-4 alkyloxy; heteroaryl; heteroarylalkyl; heterocyclic, heterocyclic C₁-4alkyl; heteroaryl C₁-4
 20 alkyloxy; aryl C₂-10 alkenyl; heteroaryl C₂-10 alkenyl; heterocyclic C₂-10 alkenyl; (CR₈R₈)_qNR₄R₅; C₂-10 alkenyl C(O)NR₄R₅; (CR₈R₈)_q C(O)NR₄R₅; (CR₈R₈)_q C(O)NR₄R₁₀; S(O)₃H; S(O)₃R₈; (CR₈R₈)_q C(O)R₁₁; C₂-10 alkenyl C(O)R₁₁; C₂-10 alkenyl C(O)OR₁₁(CR₈R₈)_q C(O)OR₁₂; (CR₈R₈)_q OC(O) R₁₁; (CR₈R₈)_q NR₄C(O)R₁₁; (CR₈R₈)_q
 25 NHS(O)₂R₁₇; (CR₈R₈)_q S(O)₂NR₄R₅; or two R₁ moieties together may form O-(CH₂)_sO- or a 5 to 6 membered unsaturated ring;
 q is 0, or an integer having a value of 1 to 10;
 t is 0, or an integer having a value of 1 or 2;
 s is an integer having a value of 1 to 3;
 30 v is 0, or an integer having a value of 1 to 4;
 R₄ and R₅ are independently hydrogen, optionally substituted C₁-4 alkyl, optionally substituted aryl, optionally substituted aryl C₁-4alkyl, optionally